Substitute for form 1449/PTO				Complete if Known			
				Application Number	10/597,236	_	
INFO	RMATION DIS	SCLOS	URE	Filing Date	September 26, 2006		
STA	TEMENT BY A	PPLIC	ANT	First Named Inventor	Hamilton, Nigel	_	
				Art Unit			
(Use as many sheets as necessary)				Examiner Name		_	
Sheet	1	of	1	Attorney Docket Number	084535-000000US		

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Signature	*	Considered	

EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

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